

## Public Health Intervention Guidance

### Promoting young people's social and emotional wellbeing in secondary education –Consultation on Draft Guidance– Stakeholder Response Table 18<sup>th</sup> February – 18<sup>th</sup> March 2009

Stakeholder Organisation	Evidence submitted	Section	Page Number	Comments Please insert each new comment in a new row.	Response Please respond to each comment
<b>Association of School and College Leaders</b>		General		The Association of School and College Leaders (ASCL) represents 14,500 members of the leadership teams of maintained and independent schools and colleges throughout the UK. This places the association in a unique position to see this initiative from the viewpoint of the leaders of secondary schools.	Thank you for your comment
<b>Association of School and College Leaders</b>		General		The association welcomes the intention and the recommendations of the guidance. However, it is not convinced that the guidance will add a great deal to the capability of schools in this area. The reasons are as follows.	We have sought to address your points as explained below
<b>Association of School and College Leaders</b>		General		Much of the guidance is to take actions that schools already take. There is insufficient acknowledgement of the existing good work of schools, which will tend to result in the guidance being rejected.	The considerations section now highlights the progress being made by schools
<b>Association of School and College Leaders</b>		General		The guidance is too lengthy and too general; school leaders are the recipients of innumerable pieces of guidance and do not have large teams to read, translate and act on it. A document of this weight that is not immediately valuable or statutory will receive little attention.	We also prepare a Quick Reference Guide that provides a more accessible document
<b>Association of School and College Leaders</b>		General		The guidance is insufficiently specific in its audience. Different guidance is needed for local authorities, secondary schools, special schools and other agencies.	The guidance defines the primary audience. Our implantation directorate prepared versions for specific audience , particularly secondary education establishments
<b>Association of School and College Leaders</b>		General		Guidance would therefore be more likely to be of value if brief and very specifically addressed.	as above
<b>Association of School and College Leaders</b>		General		The sharing of good practice between schools is likely to be of value in this area as in others, but this is not addressed.	Our implementation directorate provide follow support to guidance, including information about accessing good practice - further information can be obtained from <a href="mailto:implementation@nice.org.uk">implementation@nice.org.uk</a>
<b>Association of School and College Leaders</b>		General		The guidance has too many injunctions to pay attention to this area of work, and to train teachers and others in it, but too few examples of good ideas for how this can be done, what it is that would be the content of such training, or how such work and training can be	Greater detail is provided in the final guidance; although resourcing issues are subject to local priorities

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				accommodated in crowded curricula and training schedules without the application of significant and probably unavailable extra resources.	
<b>Association of School and College Leaders</b>		General		Schools need to be allowed sufficient flexibility to adopt approaches that suit their particular circumstances.	section 3.7 emphasises the need for flexibility
<b>Association of School and College Leaders</b>		General		There is a need for a sense in a local context of what is meant by wellbeing and what aspects of it will the focus of activity aimed at the school, a year group, or individual students. This is likely to be more complex and more controversial than this guidance assumes. The association is concerned about the possibility of systems being adopted as a way of addressing an ill-understood wellbeing agenda. For example the SEAL programme is championed by some as a panacea in this area, but it also has trenchant critics such as Carol Craig of the Centre for Excellence and Wellbeing in Glasgow, whose speech to the recent ASCL Conference was met with approval by school leaders. See <a href="http://www.centreforconfidence.co.uk/carolsblog.php?id=208&amp;blogid=1">http://www.centreforconfidence.co.uk/carolsblog.php?id=208&amp;blogid=1</a>	The preamble to the recommendations sets out the definition of wellbeing used for this guidance. We recognise these as a developing agenda
<b>Association of School and College Leaders</b>		General		Thank you for the opportunity to comment. Though these remarks are largely critical ASCL is supportive of work in this area, and welcomes an attempt to address it. The association would be willing to assist in further development.	Many thanks indeed for this comment
<b>British Association for Counselling and Psychotherapy</b>		Section one - recommendations	Page 6	BACP suggests that recommendation two on page six, regarding the target population should include school support staff as well as teachers, carers and parents.	The recommendations (including new recommendations) give greater reference to support staff; and also the role of carers and parents
<b>British Association for Counselling and Psychotherapy</b>		Section one – recommendations	Page 7	Under recommendation two, action taken, BACP suggests that this should include considering the introduction of a professional school based counselling service to act as an early intervention for young people with emotional, social or behavioural problems.	Recommendation 2 now refers to access to pastoral care and specialist services

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<b>Cornwall County Council – Cornwall Behaviour Support Service</b>		general		Need to see more explicit reference to both organisational responses to 'anti-bullying' as well as more emphasis on reporting requirement for schools both internally and to their local authority/children's service directorate and local 'safeguarding board'. Whilst some mental health issues may occur independently of schools many are actually caused by the schools and experience of schooling. Again I am not sure if this is made clear enough	The guidance emphasises the importance of integrating social and emotional wellbeing with in all policies.  The consideration section makes reference to local safe guarding arrangements
<b>Cornwall County Council – Cornwall Behaviour Support Service</b>		general		I would have liked to see some case studies referred to as lessons learned etc-i.e. how if these guidelines are rigorously implemented then cases A or B would have had improved outcomes etc.	Thank you for your comments. Unfortunately the nature of the evidence does not provide sufficient detail; however implementation tools are planned may provide access to case studies
<b>Cornwall County Council – Cornwall Behaviour Support Service</b>			4	Like to see notion of 'a sense of belonging' included here somewhere	Thank you for your comments. We agree that this is an important notion. The recommendations do promote the sense of belonging
<b>Cornwall County Council – Cornwall Behaviour Support Service</b>			9	Important to push need for initial teacher training to place more time/emphasis on social and emotional well being. Also need for newly trained teachers/staff to have awareness raising training.	The recommendations refer to training needs
<b>Cornwall County Council – Cornwall Behaviour Support Service</b>			11	These issues require a response from schools and this has to be in terms of resourcing- i.e. people available to do the job in a range of ways-but need more specific recommendations re number of trained councillors/staff with skills to deliver small group work/etc. Need ratio's etc-some of this too woolly/nebulous.	The implementation tools (costing tool) addressing such issues of resourcing
<b>Department of Health</b>		Introduction	1	In our opinion, not only teachers are relevant here. We consider that support staff often play a key role in promoting social and emotional wellbeing in secondary schools. Could you please consider recognising their potential contribution, by including them in paragraph 2.	The role of support staff is defined throughout the guidance and in this paragraph

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Department of Health			1	Could you please be explicit as to whether the guidance relates to further education, as a high proportion of young people between 16 and 19 years of age will be studying in these settings. If the guidance does not apply to further education, then we feel that this should be made clear.	The final guidance provides the definition of secondary school establishments including further education
Department of Health			5 (paragraph 1)	We would query whether "interventions" is the appropriate term to use, when what is being discussed is universal. Perhaps "provision" is a more accurate term.	This is amended in the final guidance
Department of Health		National initiatives	5	Could you please consider substituting "Healthy Schools" with "National Healthy Schools Programme (NHSP)".	This is amended in the final guidance
Department of Health		Recommendations	6	<p>In our view, it is not only that following the recommendation of taking a whole school approach will help schools meet the NHSS, but also that the NHSP provides a framework and delivery vehicle for doing it.</p> <p>We would therefore recommend that, in addition to recommending a whole school approach, explicit mention should be made of how NHSP can provide a framework to help all secondary education establishments to adopt a whole-school approach to promoting the social and emotional wellbeing of students.</p> <p>Could you also please consider making it clear that schools (which implement NHSP) will address and support pupil social and emotional wellbeing through the NHSP framework, and criteria relating to emotional health and wellbeing, which include the following:</p> <ol style="list-style-type: none"> <li><b>1. Support for Vulnerable Pupils –</b> This identifies vulnerable individuals and groups, and establishes appropriate strategies to support them and their families.</li> <li><b>2. Clear Leadership –</b> This provides clear leadership to create</li> </ol>	<p>The recommendation highlights the importance of the role of NHSP, (including in the new section on national initiatives)</p> <p>The implementation tools for this guidance make clear the links between the guidance and NHSP</p>

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				<p>and manage a positive environment , which enhances emotional health and wellbeing in school (including the management of the Behaviour and Rewards Policies).</p> <p><b>3. Planned Curriculum Opportunities – links with SEAL – This has clear, planned curriculum opportunities for children and young people to understand and explore feelings, using appropriate learning and teaching styles.</b></p> <p><b>4. Support and advice – This has a confidential pastoral support system in place for children, young people and staff to access advice (especially at times of bereavement and other major life changes), and this system actively works to combat stigma and discrimination.</b></p> <p><b>5. Combating Stigma and Discrimination – This has explicit values underpinning positive emotional health, which are reflected in practice and work to combat stigma and discrimination.</b></p> <p><b>6. Policy on Anti-Bullying – This has a clear policy on bullying which is owned, understood and implemented by the whole school community</b></p> <p><b>7. Training for staff – Provides appropriate professional training for those in a pastoral role</b></p> <p><b>8. Participation of Children and Young People – Provides opportunities for children and young people to participate in school activities and responsibilities to build their confidence and self-esteem</b></p> <p><b>9. Confidentiality Policy – Has a clear Confidentiality Policy</b></p>	

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<b>Department of Health</b>		Recommendations	6	Could you please consider including the wording "National Healthy School Status (NHSS)".	This is amended accordingly
<b>Department of Health</b>			7, bullet point 3	We would query the use of the term 'corporate', and we fear that this will be read as referring to local authorities and not schools. In our opinion, it is important for schools not only to ensure that policies incorporate EHW, but also procedures and systems.	This is amended
<b>Department of Health</b>			8, bullet point 3	We would query whether the focus in providing a curriculum should be only that it 'promotes positive behaviours and successful relationships and helps reduce disruptive behaviour and bullying.' We feel that EHW is much broader than this.	This broader role is reflected in the guidance
<b>Department of Health</b>			8	In our view, there is a difference between peer educators, mediators and mentors.	The use of different models is recognised in the final guidance on partnership working with young people
<b>Department of Health</b>			9, bullet point 3	The term 'develop' is introduced whereas elsewhere, 'promoting' and 'intervening' have been used. In our view, there is a need to ensure that these terms are being used appropriately e.g. intervening is usually associated with Tier 2.  'Psychological' wellbeing is also introduced; could you please clarify whether this is intentional	This is amended  Psychological wellbeing is included in the definition used by this guidance
<b>Department of Health</b>		3.9	12	Could you please consider including the wording "National Healthy Schools Programme".	This is amended
<b>Diabetes UK</b>		General	General	Diabetes UK welcomes the opportunity to comment on this guidance. Diabetes UK also welcomes the incorporation of approaches that look at the school environment and the need for staff training, support and leadership, as well as interventions aimed specifically at young people themselves.	
<b>Diabetes UK</b>		1 Recommendation 1	5	Under "Who is the target audience": It would be beneficial to stipulate who the professionals are, this should include support staff and health care staff in schools as well as teaching staff, head teachers	

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				and governors.	
Diabetes UK		1. Recommendation 1	6	Under “what action should they take”: When referring to organisation and management issues, it should be made clear that this encompasses the leadership required from head teachers and governors in modelling and championing a school environment that promotes emotional well being.	This leadership role is emphasised in recommendation 2
Diabetes UK		1. Recommendation 1	6	Under “what action should they take”: When referring to those at particular risk of poor mental health, the statement should also include vulnerable groups, for example, young people with health conditions, with special educational needs, and looked after children. This would complement the guidance in section 3.1. Within these recommendations, an explicit reference to medicines policies for young people with health conditions should be made. The implementation of medicines policies are contained within a number of pieces of guidance but implementation is variable. Medicines policies help ensure the medical needs of young people at school can be identified and planned for. This in turn can help promote emotional well being by protecting against issues that arise because of a lack of knowledge about medical conditions and the support that young people who have them require. A lack of knowledge about diabetes can lead to young people being excluded from activities (school trips, physical exercise), not being provided with appropriate support and facilities to administer medication, and not being supported to monitor and manage their blood glucose levels, including blood glucose monitoring and access to snacks to treat hypoglycaemia. If blood glucose levels go too high (hyperglycaemia) or too low (hypoglycaemia), this can lead to acute complications which need to be treated, and extremes of highs and lows may affect cognitive function, which in turn can affect a child's ability to learn, as well as their quality of life. Being excluded from activities and being unsupported in managing the condition can lead to bullying/ stigmatising by other young people who do not have an understanding of diabetes and how it is managed.	Those who have diabetes are included in the definition of those at risk (Public health need and practice)  The needs of those with diabetes are defined in recommendation 6

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Diabetes UK		1. Recommendation 2	7	Who should take action: This section should refer more explicitly to the range of support staff and practitioners in school that work with young people in the school setting. For example dinner ladies can play a role in supporting the needs of young people with diabetes at meal times, and would require an understanding of diabetes.	The role of support staff is emphasised throughout the guidance, although cannot be detailed in full within the scope of this guidance
Diabetes UK		1. Recommendation 2	7	Who should take action: Explicit reference to Children's Trusts should be made here.	This is amended according
Diabetes UK		1. Recommendation 2	7	Under "what action should they take": Parents should be provided with information about different schemes and programmes, such as SEAL.	The new recommendation –working with parents -
Diabetes UK		1. Recommendation 2	7	Under "what action should they take", 2 <sup>nd</sup> bullet point – when referring to bullying, also include stigmatising in this list. This can occur when people do not have an understanding of medical conditions and the needs of the young people who have them.	This point is emphasised in the considerations section
Diabetes UK		1. Recommendation 2	7	Under "what action should they take", 3 <sup>rd</sup> bullet point - it would be useful to provide practical examples of these mechanisms. The following report contains examples of how children and young people have been involved in the design of diabetes services and some also refer to the school setting: <a href="http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Involving-children-and-young-people-in-designing-diabetes-services/">http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Involving-children-and-young-people-in-designing-diabetes-services/</a>  Healthcare plans for the school setting that involve the young person with the medical condition, along with their parents/carers, specialist healthcare professional and the school, are an important example of involving young people at an individual level in identifying their needs and concerns and how these can be tackled during school time.	Thank you for this reference. The new recommendation 5 emphasises the importance of use of a range of mechanisms
Diabetes UK		1. Recommendation 2	7	Under "what action should they take", 4th bullet point - The expertise and knowledge of parents and carers of vulnerable young people should be emphasised here.	The new recommendation 4 gives increased emphasis to the role of parents

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Diabetes UK		1. Recommendation 3	8	Under “who should take action” – Again it would be useful to include support staff in the list of practitioners.	
Diabetes UK		1. Recommendation 3	8	Under – “what action should they take” – 1 <sup>st</sup> bullet point - when referring to managing relationships, please include professionals to the list stipulating parents, carers and peers.	New recommendation 5 now gives emphasis to promoting relationships between professionals and young people
Diabetes UK		1. Recommendation 3	8	Under – “what action should they take” – 1 <sup>st</sup> bullet point – the curriculum should also include information about medical conditions and disabilities. This will raise awareness of conditions and the needs of those young people. This approach could help with addressing issues with bullying or stigmatising behaviour.	The guidance has been amended accordingly (see considerations)
Diabetes UK		1. Recommendation 4	9	Under “who is the target population” - the term professionals should be better defined to list the range of staff in schools which support young people.	The training recommendation has been amended to reflect the broader range of professionals with training needs
Diabetes UK		1. Recommendation 4	9	Under “who should take action” – Please include children and young peoples specialist services, including those for young people with medical conditions, for example children and young peoples specialist diabetes teams.	The recommendation refers to all those involved in working with young people
Diabetes UK		1. Recommendation 4	9	Under “who should take action” - the role of parents as partners should also be emphasised here. For example parents of young people with medical conditions will have valuable knowledge and expertise.	The new recommendation 4 emphasises the need for working with parents and carers
Diabetes UK		1. Recommendation 4	9	Under “what action should they take” : Training regarding medical conditions, such as diabetes, should be included in the recommendations and can be delivered by members of the local children and young peoples diabetes specialist team. This training will raise awareness of diabetes, what the needs of young people with diabetes are and how these can be met within the school setting. <a href="http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/">http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/</a>	The recommendation has been amended accordingly
Diabetes UK		Section 2	10	Last statement – it is important to highlight that people may have their emotional wellbeing affected by, for example, experiences of racism, or persecution.	This statement refers to the particular evidence source; while we acknowledge there are a wide range of related issues

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Diabetes UK		Section 3 - 3.1	10	Acknowledgement of the discrimination and stigmatisation that young people can experience as a result of having a physical condition or disability should also be made.	The guidance has been amended accordingly (3.4)
Diabetes UK		Section 3 – 3.3	11	This statement requires clarity – is the reference to mental illness specific to a clinical diagnosis of mental illness?	This has been changed to mental health problems
Diabetes UK		Section 3 – 3.7	11	Not only should young people be enabled to express their views, but also to be involved in the decision making process.	This is part of the recommendations
Diabetes UK		Section 3 – 3.9	12	Further pieces of legislation and guidance which are useful vehicles to support the implementation of these recommendations can be found in the following report:  <a href="http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/">http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/</a>	Implementation tools to the guidance will provide information on relevant resources
Diabetes UK		Section 3 – 3.10	12	Other potential outcomes could include: participation in school activities, reports of bullying, school attendance.	Thank you for your comments
Diabetes UK		Section 3 – 3.11	12	Last sentence: the aim should be to improve the health as well as social and economic circumstances of young people.	This was a specific example relating to the important issues of social and economic conditions
Diabetes UK		Section 3 – 3.12	12	Diabetes UK would like to ask if NICE are considering the development of guidance that would include areas not considered in this guidance? Diabetes is a condition that needs to be managed by balancing food intake with physical activity and medication. Diabetes control can affect a young person's quality of life, and as outlined previously hyper and hypo glycaemia may affect cognitive function and impact on a young person's ability to concentrate and learn.  <a href="http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/">http://www.diabetes.org.uk/Professionals/Information_resources/Reports/Making-all-children-matter/</a>	NICE future guidance may consider this topic at some stage. We would welcome the submission of this suggestion via the NICE website
Diabetes UK		Section 4	13	The duty on local agencies to co-operate under the Children's Act	The guidance reflects this requirement

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				2004 can also be highlighted here. Furthermore draft guidance has proposed that schools will need to be involved in the strategic work of Children's Trusts.	
<b>fpa (Family Planning Association)</b>		General		<b>fpa</b> welcomes the development of the guidance on promoting young people's social and emotional wellbeing in secondary education. As noted in the document, young people's mental wellbeing can have a significant impact on their physical health and on their achievements. In particular, young people's resilience can have a protective effect, enabling them to avoid risky behaviour such as early sexual activity and unprotected sex.	Thank you for this comment
<b>fpa (Family Planning Association)</b>		1	7	In recommendation two, <b>fpa</b> welcomes the suggestion that robust mechanisms should be provided to ensure that students can contribute to decisions which could affect their social and emotional wellbeing. However, it is not clear whether these mechanisms should relate to decisions affecting individual young people or affecting students in general, for example decisions which would affect a whole school. <b>fpa</b> believes that young people should be involved in making decisions which affect them, both personally and more generally, but the mechanisms to achieve this might be quite different. Therefore, we recommend that the guidance is clarified to make it clear whether a variety of mechanisms should be needed for different types of decision-making.	The new recommendation 5 set out the fuller range of mechanisms for full involvement of young people at all levels
<b>fpa (Family Planning Association)</b>		1	7	<b>fpa</b> is pleased that there is a recommendation to enlist the help of parents and carers to develop approaches that promote students' social and emotional wellbeing. However, it is not clear whether this includes parents' and carers' activities at home or at school or both. If schools involve parents and carers in discussions about what kind of information will be delivered to young people, parents and carers may be able to inform the development of policies and curricula within schools for specific subjects, such as sex and relationships education when issues around emotional wellbeing might be discussed. In addition, keeping parents and carers involved means that they can	The new recommendation 4 sets out the range of opportunities for involving parents and carers

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				support at home what children have learnt at school. We recommend that the guidance is clarified to highlight which approach is suggested.	
<b>fpa (Family Planning Association)</b>		1	8	<b>fpa</b> recognises that it is important that whole school approaches are taken to developing young people's social and emotional wellbeing as set out in recommendation three. However, we strongly recommend that the guidance also highlights the importance of having specific time within the curriculum when these issues can be addressed with young people. Many young people say that the sex and relationships education they currently receive at school is too biological and does not give them an opportunity to discuss relationships and emotions. It is therefore vital that there are dedicated spaces within the timetable where young people have the opportunity to explore issues like emotions, values and relationships, which will all have a significant impact on their social and emotional wellbeing.	This is reflected in the guidance. NICE is currently developing a further piece of guidance on sex and relationships education
<b>fpa (Family Planning Association)</b>		1	8	<b>fpa</b> warmly welcomes the inclusion of a recommendation on helping parents and carers to develop their parenting skills. This section should refer to the possibility of programmes being delivered by voluntary sector groups. For example, <b>fpa</b> 's Speakeasy course aims to enable parents and carers to develop the skills, confidence and knowledge they need to talk with their children about sex and relationships and the specific expertise <b>fpa</b> has as a sexual health charity is an important part of that programme.	Thank you for your comment The role of the voluntary sector is specified
<b>National Health Education Group (NHEG)</b>		General		NHEG, the National Health Education Group welcomes this guidance but note that it does not include anything about staff social and emotional well-being – something that is fundamental as an organisational health issue. Healthy staff are better able to cope with the pressures of today's teaching.	the social and wellbeing of staff is now included in recommendation 1

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National Health Education Group (NHEG)		1	4	Greater emphasis on the role of social and emotional well-being in academic achievement. Pupils who have this well-being will be more confident and resilient to meet the challenges of their future. The contribution of this to academic performance cannot be ignored.	This role is now stressed as part of the preamble to the recommendations
National Health Education Group (NHEG)		1	4	The section on why is it important needs to link with the school's statutory duty to promote well-being and perhaps mention the Ofsted indicators which are currently being developed for use from September 2009.  As in the point above it is important to link all of this to school improvement.	The Ofsted indicators is now referenced in recommendation 2
National Health Education Group (NHEG)		1	5	We do not feel that there is sufficient mention of the contribution of social and emotional wellbeing to the delivery of The Children's Plan and all 5 outcomes of 'Every Child Matters'.	The guidance has been amended accordingly
National Health Education Group (NHEG)		1	5	'National Initiatives' section: to include The children's Plan, ECM and Well-being Indicators (as in 4 above) and reference to the 21 <sup>st</sup> century school.	Thank you for your comments
National Health Education Group (NHEG)		Recommendation 1	6	"... curriculum-based activities.." does this mean planned learning opportunities for the pupils that go on in the school ie. in the curriculum and beyond ie. extra curricular, off site visits, residential etc.	The guidance has been amended accordingly (referencing extra curricular activities)
National Health Education Group (NHEG)		Recommendation 1	6	PSHE should read PSHEe to be in line with the new secondary curriculum Obviously a dilemma as the Primary Curriculum Review is still underway.  The 2 programmes of study in the new secondary curriculum will both contribute to the social and emotional well-being so this should be	Thank you for your comment The guidance has been amended accordingly

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## Public Health Intervention Guidance

### Promoting young people's social and emotional wellbeing in secondary education –Consultation on Draft Guidance– Stakeholder Response Table 18<sup>th</sup> February – 18<sup>th</sup> March 2009

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				made clear when referencing PSHE.	
<b>National Health Education Group (NHEG)</b>		Recommendation 2	7	<p>Need to clarify what is meant by 'Create a culture of equity? In the new secondary curriculum there is a strong expectation that the curriculum opportunities will meet the needs of the young people and be locally determined. So not every pupil will get the same – it will be based on need. How does this concept fit?</p> <p>You need to adopt a more positive picture when describing the safe environment – it is one in which pupils feel safe to express their views and have their contributions valued without any repercussions which may take the form of bullying. It is linked to the ethos of the school and the way in which all members of the school community interact, respecting each other and demonstrating behaviour which allows all pupils to develop.</p>	This point has been amended accordingly, stressing 'inclusiveness' and enabling responsive to the needs of those at risk
<b>National Health Education Group (NHEG)</b>		Recommendation 2	7	Schools need to have social and emotional well-being in all of their policies so that the links are clear in so much as how the individual policy promotes/supports the development of this well-being.	The recommendation stresses this point
<b>National Health Education Group (NHEG)</b>		Recommendation 3	8	This is very similar to the point made in 7. It is about a school ethos in which members encourage the development of successful relationships and model positive behaviours.	Thank you for your comment. Recommendations 1 and 3 are both concerned with this aim
<b>National Health Education Group (NHEG)</b>		Recommendation 3	8	Need to include skill of collaborative working – helps to develop the positive relationships talked about earlier and helps pupils to develop other skills such as negotiation, assertion	This guidance has been amended accordingly
<b>National Health Education Group (NHEG)</b>		Recommendation 3	8	Need to stress that peer educators are supported by staff and professionals both inside and outside the school.	The recommendation has been amended accordingly

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<b>National Health Education Group (NHEG)</b>		Recommendation 4	9	NHEG believe that continuing professional development is vital to a school's development. Could you reference the National PSHE CPD programme in the National Initiatives section.	Follow up implementation tools for this guidance will provide information on accessing such issues as suggested
<b>National Health Education Group (NHEG)</b>		3.2	11	SEAL is a very important resource but its purpose was linked to behaviour and attendance. Whilst some of the activities link very closely with PSHE the two must work together. This needs coordination, strong leadership and good management. Some schools are using SEAL to support small groups of special needs and vulnerable pupils to good effect.	The importance of leadership and management is stressed in the guidance
<b>National Health Education Group (NHEG)</b>		3.8	12	Opportunity here to reiterate (again) the importance of social and emotional well-being to achievement (and school improvement).	This link is emphasised in the preamble to the recommendations
<b>National Health Education Group (NHEG)</b>		3.9	12	Link in the National PSHE CPD Programme.	Follow up implementation tools for this guidance will provide information on accessing such issues as suggested
<b>National Health Education Group (NHEG)</b>		3.10	12	Another mention here of the 'Wellbeing indicators'.	This is referenced in recommendation 2
<b>National Health Education Group (NHEG)</b>		3.11	12	Another opportunity to link in the 21 <sup>st</sup> Century school	We must prioritise references to national initiatives/strategies , given the space available
<b>National Health Education Group (NHEG)</b>		3	13	NHEG is glad to see the link to physical activity here. We believe that planned physical activities can contribute to pupils' social and emotional well-being and provide things beyond normal curriculum time that allow pupils to develop and refine their social skills.	Thank you for your comments.
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		General		NSCoPSE, the national organisation for advisors, consultant and inspectors in Personal and Social Education welcomes this guidance. Although the promotion of young people's social and emotional wellbeing is hugely important and underpins school success and	The promotion of staff wellbeing in new included in recommendation 1

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				improvement, we note with concern that no mention is made of the need to promote staff social and emotional wellbeing. The increasing pressures on secondary schools in terms of organisation, standards and work load mean that the wellbeing of staff (teachers and other adults working in and with schools) can, all too frequently, be overlooked. Without staff wellbeing there is unlikely to be social and emotional support for children and young people.	
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		1	4	We feel that the statement “...it can determine how well they do at school..” fails to emphasise the importance of social and emotional wellbeing in both the attainment and achievement of children and young people. We suggest “... is essential to academic achievement and makes a significant impact on the present and future life chances of children and young people.”	The guidance (preamble to recommendations) now stresses the link between social and emotion wellbeing and ability to learn and achieve academically
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		1	4	The importance of social and emotional wellbeing cannot be underestimated in terms of schools statutory duties to promote well-being and social cohesion. This should be noted in the 'Why is it important' section to strengthen this message and encourage schools to see the links between social and emotional wellbeing, and school improvement.	This statutory duty is defined in the final guidance
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		1	5	This guidance also needs to remind readers of the importance of social and emotional wellbeing to the delivery of The Children's Plan and all 5 outcomes of 'Every Child Matters'. Reference should also be made to this in the 'National Initiatives' section on page 5.	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		1	5	Similarly in the 'National Initiatives' section, reference should be made to the forthcoming 'Well-being indicators' against which schools will be inspected as from September 2009.	Reference the well being indicators in now included in recommendation 2
<b>National PSE Association for</b>		1	5	Also in the 'National Initiatives' section we recommend the mention of	The guidance is unable to include reference to all initiatives and we sought

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<b>Advisor Inspectors and Consultants (NSCoPSE)</b>				the 21 <sup>st</sup> Century School initiative to encourage schools to make the links between young people's social and emotional wellbeing, schools and school improvement.	to prioritise those most relevant to the guidance
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 1	6	Where the report says "... curriculum-based activities.." we feel that this rather may restrict the obligations on the school (for example lunchtime and after school clubs, queuing for lunch and even changing for PE). This should therefore read ".. all activities during the school day, both on and off-site..".	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 1	6	The reference to "personal, social and health education (PSHE)," is welcomed and important but should probably read "personal, social, health and economic education (PSHE Education) and Citizenship to ensure that colleagues developing or delivering the Economic wellbeing & Financial Capability are reminded of the important role of EWBFC to emotional health and wellbeing.	This has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 2	7	We are concerned that schools may not understand what is meant by a 'Create a culture of equity...' – does this mean treating everyone the same? Similarly, rather than describe a deficit model to "Provide a safe environment which reduces the threat of any form of bullying and violence." Could this be couched in more positive, proactive terms such as: "Provide a safe environment which nurtures and encourages young people, which fosters their sense of self worth and self-efficacy and reduces the threat of any form of bullying and violence."	This has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 2	7	It is very important to remind schools that integrating issues relating to social and mental wellbeing within corporate policies and activities, including school improvement plans. However, we would recommend strengthening this message by referring more explicitly to "...social and mental wellbeing within school policies, (e.g. Rewards and Sanctions, Attendance and Behaviour (including anti-bullying	The guidance now emphasises the integration of social and emotional wellbeing within all policies, processes and activities

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				strategies) and activities including school improvement plans.” We feel that this emphasis will help to clarify things for schools.	
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 2	7	Rather than the rather passive statement “Provide a safe environment which reduces the threat of any form of bullying and violence.” We recommend: “Developing systems which enable all members of the school community to challenge bullying and discriminatory behaviour (including sexism, racism and homophobic discrimination) and which fosters a positive ethos where such anti-social behaviour is unacceptable.”	The recommendation (2) stresses the importance of an ethos of mutual respect and inclusiveness
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 3	8	Rather than “Provide a curriculum that promotes positive behaviours...” we feel that schools should be reminded that much anti-social and intimidatory behaviour occurs out of curriculum time. If young people are to enjoy successful relationships, these need to be demonstrated by the professionals with whom they come into contact. We therefore suggest “Provide a positive school ethos and model positive behaviours to promote successful relationships...”	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations	8	In addition to the “Skills that should be developed include: problem-solving...” we suggest that explicit reference is made to ‘working collaboratively in groups’ to emphasise the contribution that such activities and skills can make in all curriculum areas.	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 3	8	In the section about training peer educators (or mediators) to promote positive relationships (which we support) could we add “...with the support of teachers and other professionals in school.” As many peer support activities are or can be led by Youth workers and others.	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		Recommendations 4	9	We fully support the notion of providing continuous professional development for teachers and other professionals. We suggest that it would be useful to remind schools and others of the National PSHE CPD Programme (joint funded by DCSF and DH) which provides	Followup implementation tools for this guidance will provide information on accessing such issues as suggested

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				training and accreditation for teachers and other professionals delivering PSHE Education and gives the opportunity for specific focus on Emotional Health and Wellbeing.	
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		3.2	11	This endorsement of the SEAL programme is helpful but we feel that in addition to recommending the need for strong leadership, good management and organisation it may be useful to recommend that this is adopted across all curriculum areas.	The guidance has been amended accordingly
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		3.8	12	In addition to the comments about the positive outcomes of initiatives to promote young people's well-being, this maybe a good opportunity to (re)endorse the fact that promoting social and emotional wellbeing also contributes to achievement and school improvement – the core business of schools.	This link is now stress in the preamble to the recommendations
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		3.9	12	This section also provides an opportunity to promote the National PSHE CPD Programme.	The implementation advise (issued subsequent to the guidance) will define such opportunities
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		3.10	12	We feel that it maybe worth reiterating the 'Wellbeing indicators' against which schools will be inspected as from September 2009.	The wellbeing indicators are defined in recommendation 2
<b>National PSE Association for Advisor Inspectors and Consultants (NSCoPSE)</b>		3.11	12	This section is an opportunity to endorse the link between young people's social and emotional wellbeing, schools and the 21 <sup>st</sup> Century School initiative.	The guidance is unable to include reference to all initiatives and we sought to prioritise those most relevant to the guidance
<b>National PSE Association for Advisor Inspectors and Consultants</b>		3	13	We welcome the mention of promoting of physical activity in and the contribution to the social and emotional development of young people. We suggest adding to this paragraph something about the	The relationship between social and emotional wellbeing and nutrition is beyond the scope of this guidance

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(NSCoPSE)				importance of nutrition and adequate drinking water freely available in schools and of course the importance of good, safe toilet facilities.	
new economics foundation (nef)		1	4	Definition of social and emotional well-being: It is encouraging to see that the definition includes many of the aspects commonly identified by the research literature as elements of well-being. Other elements which the research suggests should be included are, in psychological well-being, having a sense of meaning and purpose (see for example, Ryan and Deci (2001) <i>Annual Review of Psychology</i> 52:141-66 ); and in social well-being, actually <i>experiencing</i> good social relationships, both with close family and friends and with broader networks, (see for example, Aked <i>et al.</i> (2008) 'Five ways to well-being: the evidence, London:nef) as well as the ability to form such relationships.	Thank you for your comments
new economics foundation (nef)		1	5	Recommendation 1: The scope of who should take action is very broad, but specific tasks such as 'monitoring the progress of schools and addressing any variation in standards' will only be achieved if there are clear lines of accountability with responsibilities for carrying them out assigned to particular stakeholders. The guidance should therefore encourage responsibilities for these tasks to be clearly established.	The recommendation emphasises the importance of the CYP Plans as the strategic governance mechanism
new economics foundation (nef)		1	6	Recommendation 1: While specialist skills, advice and support are a very important aspect in helping schools to promote social and emotional well-being, the guidance should not undervalue the expertise that school staff themselves have in promoting young people's well-being. Their huge experience of working at first-hand with young people means that they will have very important contributions to make when thinking about which activities and interventions promote aspects of well-being such as autonomy, attentiveness and engagement, a sense of involvement with others and so on. The guidance should therefore explicitly refer to this source of expertise, as well-being is something which school staff should place at the core of all their activities, and not be made to feel that it is something they will always needs specialist help to achieve.	The role of school staff is emphasised throughout the guidance, and particularly the promotion of social and emotional wellbeing as part of their core activities

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new economics foundation (nef)		1	7	Recommendation 2: '...foster an ethos that promotes positive behaviours for learning and for successful relationships among students'. Research notes the importance of experiencing positive emotions in actively broadening people's ability to adopt new patterns of thinking, which is beneficial to situations requiring problem solving (Frederickson (2001) <i>American Psychologist</i> 56:218-226) and indicates that greater autonomy leads to greater conceptual learning (Grolnick and Ryan (1987) <i>Journal of Personality and Social Psychology</i> 52:890-898 ). The guidance should state that promoting young people's well-being is an important element of promoting their ability to learn effectively.	Thank you for this reference
new economics foundation (nef)		1	7	Recommendation 2: 'Provide robust mechanisms to ensure students can contribute to decisions which could influence their social and emotional wellbeing (as well as their learning and academic opportunities).' Given that autonomy and sense of control are themselves important aspects of well-being, it should be recognised that allowing students to contribute to decisions influencing their well-being is itself a mechanism by which their well-being can be enhanced. The guidance should make this clear, and could point to some mechanisms for enabling this sort of co-production approach. For example school programmes of the type of Learning to Lead, a co-production approach in schools which is currently the subject of a national evaluation. This programme creates self-elected school community councils, where pupils operate in self-managing teams to undertake projects with outcomes which demonstrably improve aspects of school life. Another example is timebanking initiatives, which use a time credit system measure and reward contributions of young people, parents and teachers. This sort of approach is clearly also of relevance to enlisting the help of parents and carers in promoting well-being.	Thank you for your comment. The new recommendation 5 emphasises the importance of use of a range of mechanisms for full involvement of young people at all levels
new economics foundation (nef)		1	8	Recommendation 3: As well as explicitly promoting positive behaviours, social and emotional skills, the design of the curriculum can help promote well-being by providing a sense of engagement in learning. US psychologist Csikszentmihalyi (Csikszentmihalyi (1990)	Thank for you comment and reference

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				<i>Flow: The Psychology of Optimal Experience</i> , New York: Harper and Row) refers to the concept of <i>flow</i> to describe the distinctive feeling of deep, effortless concentration, total immersion in the task and a distorted sense of time among people who find experiences enjoyable and fulfilling in themselves. By promoting flow experiences through the curriculum schools will help students to find the process of learning intrinsically rewarding and thus, in itself, become a contributing factor to their well-being.	
<b>new economics foundation (nef)</b>		1	8	Recommendation 3: Using peer mentors is a welcome suggestion, embodying elements of the co-production approach and enhancing pupil autonomy, as discussed earlier. The value of participation to the mentors themselves should not be overlooked, as research shows the importance to well-being of giving to and helping others (Aked <i>et al.</i> (2008) <i>op cit.</i> ).	Thank you for your comments
<b>new economics foundation (nef)</b>		1	9	Recommendation 4: Those providing training and guidance to schools, may also, like <b>nef</b> , be organisations with research expertise in the field of well-being.	Thank you for your comment
<b>new economics foundation (nef)</b>		3	12	Paragraph 3.11. Given what is noted in this paragraph, that school-based activities are part of a much broader context which influences young people's well-being, and the importance placed on social well-being and connecting with others, it would be useful to suggest to schools that a useful strategy could be to consider well-being promoting activities that encourage young people to make links with their broader community. Community-based voluntary work is referred to in recommendation 3, but the benefits of making community links could usefully be given a stronger emphasis.	Recommendation 3 makes reference to such links
<b>new economics foundation (nef)</b>		General		In order to track their progress in promoting young people's well-being, schools should be encouraged to regularly measure the well-being of their pupils. This will enable them identify the key areas of focus required in promoting well-being and to monitor changes over time. These measurements should include pupils' subjective self-reports of their experiences so that the various elements of emotional, psychological and social well-being are properly captured.	The guidance has been amended accordingly

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<b>Nottinghamshire Healthcare NHS Trust</b>				<p>We have developed &amp; progressed the remit here in Notts Trust. I &amp; colleague Jonathon Wright- communications team, have created a leaflet specifically aimed @ mental health promotion/education- with a strong anti-stigma ethos; &amp; for secondary education institutes (please find attached our latest draft)</p> <p>This will be circulated with a letter of introduction to all schools here in the county of Nottinghamshire. Our aim is then to follow this up with a <i>resource package</i> of sorts, enabling both staff &amp; students to explore mental health as part of their PHSCE agenda</p>	Thank you for this reference
<b>Partnership for Schools</b>		Recommendation 2	7	<p><u>Integrating issues relating to social and mental wellbeing within corporate policies and activities.</u> The Building Schools for the Future programme requires local authorities to deliver a change management programme alongside the capital build. This is articulated through the Strategy for change document produced at a local authority and then school level. The BSF programme could provide some useful examples of where schools and local authorities are delivering Every Child Matters outcomes using BSF as a catalyst. For example school circulation and toilets are being designed to deter bullying. A 'Schools within schools' approach is allowing students to familiarise themselves with a smaller community of students and staff. Project based learning is enabling schools to work cross-curricular to provide a more rounded approach to learning. For example, PE Science and Food Technology may work together and shared spaces to deliver learning around healthy lifestyles which can then also be used by PCT, Adult Community Groups and for Family Learning etc.</p>	Thank you for this comment
<b>Partnership for Schools</b>		Recommendation 3	8	<p><u>Provide a curriculum that promotes positive behaviours and successful relationships and helps reduce disruptive behaviour and bullying.</u> Sport England have been able to demonstrate a strong link between sport and positive behaviour including psychological health and</p>	The specific relationship between physical activity and social and emotional wellbeing is beyond the scope of this guidance

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		3.12	12	wellbeing.. See the value of sport monitor <a href="http://www.sportengland.org/index/get_resources/vosm/about_vosm.htm">http://www.sportengland.org/index/get_resources/vosm/about_vosm.htm</a> Although the link between physical activity and social and emotional wellbeing is recognised it is not addressed in the document. As there is a clear relationship and link between these it may be useful to consider them together.	
<b>PSHE Association</b>		1	5	R1 Suggest that schools be extended to include PRUs and Looked After Children	The term secondary education establishments is now used in the guidance
<b>PSHE Association</b>		1	6	There really ought to be a reference here to Extended Schools and the Behaviour and Attendance Strategy	We must prioritise the range of strategies identified given the space available
<b>PSHE Association</b>		1	6	R2 Does secondary education 11-19 include those students in post 16 education (FE) and training?	Yes.
<b>PSHE Association</b>		1	7	If FE is involved then others besides head teachers, teachers, governors will need to be involved.	Yes
<b>PSHE Association</b>		1	7	R3 Again doesn't differentiate sufficiently between 11-16 and 16-19 sectors	We recognise the diversity within this age group , however the guidance (and evidence) was unable to consider subgroups
<b>PSHE Association</b>		1	8	Needs to reference PSHE education personal well-being 11-16 and the development of SEAL (Social and Emotional Aspects of Learning) resource in secondary schools building upon its use in primary phase	The guidance has been amended accordingly
<b>PSHE Association</b>		1	9	R4 Now talks specifically about 11-16 which is confusing having used 11-19 earlier	This has been amended
<b>PSHE Association</b>		1	9	What does appropriately qualified mean for those providing training?	Recommendation 6 now details training needs
<b>PSHE Association</b>		3	11	3.3 Really ought to reference Extended Schools and targeted intervention with those most at risk	Given the space available the role of Extended Schools could not be covered specifically
<b>PSHE Association</b>		3	11	3.4 Schools have had a statutory responsibility to promote well-being of pupils since September 2008	The guidance now states this clearly
<b>PSHE Association</b>		3	11	3.7 Consulting with pupils is a statutory requirement following	This is reflected in the new

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				amendment Section 29A Education Act 2002	recommendation 5
<b>PSHE Association</b>		3	12	3.11 Make reference here to PSHE Education Economic Well-being and Financial capability	The guidance has been amended accordingly
<b>Royal College of Nursing</b>		General	General	With a membership of over 400,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.  The RCN welcomes this guidance. It is comprehensive.	Thank you for this comment
<b>Royal College of Nursing</b>		Definitions	5	'Whole-school approaches' – part of this is having structures in place, such as access to school nurses. Drop-in clinics with school nurse (and others for example youth worker, GP) should be considered as part of the whole school approach as it provides access to all pupils, event though all will not use it.	Although not referenced in detailed this role encompassed in the recommendation (1,2,5)
<b>Royal College of Nursing</b>		National Initiatives	5	Good that this complements the Healthy Schools and other national initiatives.	Thank you
<b>Royal College of Nursing</b>		Who should take action	5 and 6	School Governors – they do an important job voluntarily and need more training and help to be fully aware of the impact of school ethos on pupils' wellbeing	The guidance now includes reference to the training needs of governors
<b>Royal College of Nursing</b>		What action should they take	6	'....schools have access to the specialist skills advice etc' – the school nurse is a key player in linking with wider health services and was identified as such in previous Government documents.	Thank you
<b>Royal College of Nursing</b>		Who should take action	7	First paragraph /first bullet point- suggest include school nurses here.  Second paragraph/ second bullet point - suggest include GP practice team as this is where young person's electronic health record will be held.	School nurses are referenced

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### Promoting young people's social and emotional wellbeing in secondary education –Consultation on Draft Guidance– Stakeholder Response Table 18<sup>th</sup> February – 18<sup>th</sup> March 2009

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<b>Royal College of Nursing</b>		What action should they take	7	Leadership, culture of equity all good and welcome. 'Enlisting help of parents' – sounds good in theory but in reality difficult to do, need culture of involvement which does not happen in many schools. School nurses could make themselves available to parents for example at parents evenings, in school brochure to advertise times when drop-in runs etc.	Recommendation 4 now emphasises the need to consider ways of involving parents
<b>Royal College of Nursing</b>		What action should they take	8	Agree with curriculum development as stated. But should also include structural aspects such as regular and reliable drop-in services for young people (with youth worker, counsellor, school nurse, GP) depending on local need.  Good to have peer educators, empowering for young people.  'Parenting Groups' – Do not agree that nurses should do this – more appropriate to have Education or social work professionals. Nurses need to concentrate on meeting health needs, empowering pupils' abilities for self-care, ensuring equity of access to health services for vulnerable young people.	The role of these services are included in other recommendations  The guidance has been amended accordingly
<b>Royal College of Nursing</b>		Public health need and practice	10	Psychological and emotional problems can be linked with some long-term conditions. School nurse drop in can improve pupils access to physical care which in turn may reduce mental health problems and stress. For example, empowering pupils' abilities for self care such as asthma, diabetes, epilepsy etc.	The guidance now makes reference to long term conditions (recommendation 6, considerations)
<b>Royal College of Nursing</b>		Public health need and practice	10	Good that document identifies looked after children and young carers as at high risk of mental health problems. Access to school nurse can help ensure that those in less disadvantaged areas get the same level of physical health care (immunisations, asthma check, etc) as young people from more affluent areas.	Thank you for your comments
<b>Royal College of Nursing</b>		Considerations	11	The document acknowledges that 'Secondary Establishments vary considerably...' Inequity in provision needs addressing – see paper re nursing workforce figures available: Gleeson C. (2009). School nurses' workloads: how should they be prioritised? <i>Community</i>	Thank you for your comments

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				<i>Practitioner, 82, 1, 23-6.</i>	
Royal College of Nursing		implementation	13	Suggest that implementation will cost money upfront but long-term savings will result in terms of less severe mental health problems, less prison, youth justice etc.	Cost effectiveness is detailed in the economic analyses
Royal College of Nursing		Membership of the Committee	17	Could benefit from more nurse representation on the Group – there is only one nurse, and no School Nurse, CAMHS or Adolescent Health Nurse.	The Public Health Intervention Advisory Committee is a standing committee that seeks to ensure representation of a wide range of different academic and professional groups as well as lay member. NICE guidance development processes ensure that the a full range of nursing input and specialist services were involved (see fieldwork report) and their comments are considered by the Committee
Royal College of Paediatrics and Child Health		General	1-10	Very repetitive format, the target population for instance does not need to be repeated for each recommendation, when it remains the same.	All guidance is required to use the standard template for the presentation of recommendations
Royal College of Paediatrics and Child Health		Recommendation 2		The majority of this would seem to reflect current good practise, the recommendation that young people become involved in decisions affecting their emotional wellbeing etc however needs more specific measures to be stated, rather than a broad generalisation.	The final guidance includes a new recommendation 5 on working in partnership with young people ; and presents a wide range of measures
Royal College of Paediatrics and Child Health		Recommendation 3	8	The recommendation of group based parenting programmes involving school nurses will have significant work implications; it is unclear what supporting evidence there is for this statement.	This has been amended to 'appropriately trained health or education professionals'
Royal College of Paediatrics and Child Health			10	I am unclear why details regarding mental illness, a completely different category of illness, should be given in reference to "social and emotional wellbeing", are they implying there is a link?? This section needs to be much more focussed on the specifics relevant to this guidance.	This has been amended to mental health problems
Royal College of Paediatrics and Child Health		3.2	10/11	Can the GDG cite published evidence of the efficacy of SEAL?	Reference is made to the pilot evaluation of SEAL in secondary education; however the national evaluation is a three year project and findings on efficacy are

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					not available at this stage
Royal College of Paediatrics and Child Health		3.6		Again, tenuous link. Would it not be more pertinent to suggest that children who are demonstrating signs of emotional social distress may be doing so as a consequence of abuse / neglect and this should be considered in this context, then refer to the forthcoming NICE guidance on recognition of maltreatment for instance?	The guidance does reflect this suggestion.
Royal College of Paediatrics and Child Health		3.9		Is there any evidence that PSHE is an effective means of dissemination / implementation of such guidance?	This consideration reflects the mechanisms currently available. NICE is currently developing programme guidance on PSHE
Royal College of Paediatrics and Child Health			33	It appears to me that this guideline is based on a very slim evidence base, predominantly relying on “expert opinion” and no more than three RCTs, with conflicting results. I think it is a weakness of this document that the gaps in the evidence are not alluded to in the main summary, and from my scanning of the evidence cited, I could see none validating the use of SEAL. If there is such data, it should be specifically alluded to, as it is being heavily promoted.	Reference is made to the pilot evaluation of SEAL in secondary education; however the national evaluation is a three year project and findings on efficacy are not available at this stage
Royal College of Paediatrics and Child Health		General		The lack of emphasis on tactics to minimise or address serious bullying is a major weakness in this guidance. This is acknowledged as being of considerable concern to young people, has clear mental health and social wellbeing consequences, yet no tangible suggestions for identifying or tackling this issue have been given.	The guidance is based on the best evidence available at this stage. Research recommendations highlight the weaknesses in the evidence base and the need for research
Royal College of Paediatrics and Child Health		7	35	“valuing” should we assume read “evaluating”	valuing –this reflects the need for a common metric/currency across different sectors ie QALYs are not meaningful for education
YWCA England and Wales		General		YWCA wants to see a whole school and curriculum based approach to securing equality and diversity, including gender equality. Experiencing inequality and discrimination can directly and negatively effect mental health and wellbeing. Including equality in this guidance fits well with the aim of achieving social and emotional wellbeing for all pupils.  Schools must actively challenge discrimination but they must go	The guidance emphasises the importance of promoting equity and diversity and avoiding discrimination and stigma

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				further and also positively promote equality. This includes offering pupils positive role models and challenging gender stereotypes.	
<b>YWCA England and Wales</b>		General		We understand from previous consultations (DCSF and Ofsted) that pupils will be able to assess their own wellbeing in schools through indicators. We welcome this approach. Equality should be reflected in pupils' own indicators. Pupils should be asked if they understand equality matters and if they feel they are treated equally and experience equality of opportunity. Such questions should be broken down by gender, sexuality, race, religion and disability at least.	The guidance makes reference to the OFSTED guidance on indicators of wellbeing
<b>YWCA England and Wales</b>		General		We feel that the guidance lacks any reference to PHSE and in particular sex and relationships education. As DCSF has announced that PHSE will soon become statutory we feel the time is right to utilise the benefits of this subject. In particular we feel that more emphasis should be placed on relationships education.	the guidance has been amended accordingly
<b>YWCA England and Wales</b>		General		YWCA is worried about gender based bullying in schools. This can be physical or non-physical bullying based on gender or sexuality, or where sexuality is used as a weapon. It can be anything from sexual words to putting someone down to sexual threats, unwelcome touching or forcing sexual acts on a person. Young people need to be educated about what is and is not acceptable behaviour. Additionally, the normalisation of gender based bullying must be challenged. For example, some young people describe acts like 'pinching bums' as a 'bit of a laugh,' but in reality it can be very upsetting. YWCA is currently working with the DCSF Anti-bullying team to address gender based bullying.	The guidance emphasises the importance of avoiding all forms of bullying
<b>YWCA England and Wales</b>		1	7	Foster an ethos that promotes positive behaviours for learning and for successful relationships among students. Create a culture of equity that seeks to ensure all students' <a href="#">[insert] respect each other's equality and diversity and secures good</a> mental wellbeing and, by	The recommendation term 'inclusiveness' encompasses the importance of crating an ethos that promote equity and diversity

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				doing so, addresses the needs of those who may be at risk of poor mental health. Provide a safe environment which reduces the threat of any form of bullying and violence.	
YWCA England and Wales		1	7	<p>The section on who should take action and what action should they take is unclear. It needs to define which groups of people should take what actions.</p> <p>YWCA suggests [after] Enlist the help of parents and carers to develop approaches that promote students' social and emotional wellbeing. [insert] Enlist the services of voluntary youth organizations to target support at the most vulnerable and in need pupils</p>	New recommendations 4 and 5 help highlight different responsibilities for action
YWCA England and Wales		1	8	Provide a curriculum that promotes positive behaviours, successful relationships, [insert] equality and diversity and helps reduce disruptive behaviour and bullying.	
YWCA England and Wales		1	8	Skills that should be developed include: problem-solving, conflict management/resolution, how to understand and manage feelings, [insert] respecting others and valuing equality and difference in others and how to manage relationships with parents, carers and peers.	Thank you for your comments
YWCA England and Wales		1	8	<p>[After] Consider recruiting and training peer educators [insert] Consider recruiting mentors and role models for pupils including youth workers and people from the wider community</p>	Thank you for your comments. The recommendation refers to a range of 'professionals'
YWCA England and Wales		2	10	<p>Re: The relationship between ethnicity and mental disorders is difficult to interpret. YWCA would like to draw NICE's attention to the severe bullying experienced by Gypsy and Traveller pupils. (See Appendix 1 A long way to go p.5 and 9) DfES (2003) noted that Gypsy and Traveller pupils experience high levels of prejudice, discrimination and lack of</p>	Thank you for this information

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				understanding in the mainstream education system. Gypsy and Traveller women suffer from greater and more frequent feelings of anxiety and depression than other groups of women and men.	
YWCA England and Wales		Appendix D	36	There is a lack of evidence about pupils' experiences of gender equality and how this impacts on their social and emotional wellbeing. YWCA would be happy to work with NICE to investigate this further	Thank you

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